P2 - BUILDING PERMIT APPLICATION

| | | Date: | | | | | | |
|---|----------------------------------|-----------------|--------------------|-------------------|--|--|--|--|
| PROPERTY INFORMATI | ON | | | | | | | |
| Address: | | Floor: | Suite#: | Stories: | | | | |
| AKA: | | | | | | | | |
| Parcel ID#(s): | | | | | | | | |
| Current Legal Use of Property | | | | | | | | |
| Are there any existing buildin | gs or structures on this par | cel? | Yes |] No | | | | |
| PROJECT INFORMATIO |)N | | | | | | | |
| Permit Type: New | Alteration Addit | ion \square D | emolition | Correct Violation | | | | |
| Foundation Only Ch | | | | ! | | | | |
| Revision to Original Permi | | _ | | | | | | |
| Description of Work (Descri | | | | | | | | |
| | ' ' | | | | | | | |
| | | | | _ | | | | |
| | | MBC use c | hange 🗌 No | MBC use change | | | | |
| Included Improvements | heck all applicable; these trade | areas require | separate permit ap | pplications) | | | | |
| HVAC/Mechanical | Electrical Plumbing | Fire | Sprinkler Systen | n Fire Alarr | | | | |
| Structure Type | _ | | | <u> </u> | | | | |
| New Building Exist | ing Structure Tenant | Space [| Garage/Acce | essory Building | | | | |
| Other: S | ize of Structure to be Dem | olished (LxV | VxH) | cubic ft | | | | |
| —————————————————————————————————————— | | Yes | No | | | | | |
| (e.g. interior demolition or construc | ction to new walls) | | | | | | | |
| Use Group: | | | Code Table 601)_ | | | | | |
| Estimated Cost of Construc | tion \$ | | \$ | Department | | | | |
| Structure Use | | or | | Department | | | | |
| Residential-Number of Units: _ | | | | | | | | |
| Commercial-Gross Floor Area: | | | | ss Floor Area | | | | |
| Proposed No. of Employees: | | | | | | | | |
| PLOT PLAN SHALL BE submitt (must be correct and in detail) | • | | | | | | | |
| existing and proposed distanc | | _ | | _ | | | | |
| | For Building Departme | ent Use On | ly | | | | | |
| Intake By: | Date: | Fee | es Due: | DngBld? No | | | | |
| Permit Description: | | | | | | | | |
| | | | | | | | | |
| Current Legal Land Use: | | Proposed Use: | | | | | | |
| Permit#: | Date Permit Issued: | | Permit Cost: \$ | | | | | |
| Zoning District: | Zoni | ng Grant(s) | : | | | | | |
| Lots Combined? | es No (attach zo | ning clearance | e) | | | | | |
| Revised Cost (revised permit ap | oplications only) Old \$ | | New \$ | | | | | |
| Structural: | Date: | N | lotes: | | | | | |
| Zoning: | Date: | N | lotes: | | | | | |
| Other: | Date: | Ν | lotes: | | | | | |

P2 - BUILDING PERMIT

| Property Owner/Home | <u> </u> | 1 | er/Homeown | er is Permit | Applicant |
|---|---|--|---|--|---|
| Name: | | Comp | any Name: _ | | |
| Address: | | | | State: | Zip: |
| Phone: | | | | | |
| Driver's License #: | | | | | |
| Contractor Co | | | | | |
| Representative Name: _ | | Con | npany Name: | | |
| Address: | | City: | | State: | Zip: |
| Phone: | Mobile: | | Email: | | |
| City of Detroit License # | : | | | | |
| TENANT OR BUSIN | ESS OCCUPA | NT Ter | ant is Permit A | pplicant | |
| Name: | Phone: _ | | Email: | | |
| ARCHITECT/ENGIN | EER/CONSUL | TANT Ar | chitect/Engine | er/Consultan | t is Permit Applican |
| Name: | | | | | |
| Address: | | | | • | |
| Phone: | | | | | |
| | R AFFIDAVIT (O | | | | |
| inspections related to the other person, firm or corporate Name: (Hotel Control of the control | poration any porti | ion of the work | covered by thi | s building p | ermit. |
| Subscribed and sworn to b | | | | | |
| Signature: | | | | | |
| | (Notary Public) | | | | |
| | PERMIT | APPLICANT S | IGNATURE | | |
| I hereby certify that the irestrictions that may apposed to make this application all applicable laws and oinspections are request the previous inspection | oly to this construct d work is authorized as the property coordinances of jurise ared and conducted | ction and am aved by the owne owner(s) authorized iction. I am aved within 180 c | vare of my rest r of the record zed agent. Fu vare that a po lays of the da | sponsibility to d and I have rther I agree ermit will e | thereunder. I been authorized to conform to xpire when no |
| Print Name:(Perm | | Signature: | | | _ Date: |
| | | | | | |
| Driver's License #: Subscribed and sworn to b | afora ma this | Exp | | ` | Carrata Miakina |
| | | | | | |
| Signature: | (Notary Public) | iviy Com | mmssion Expir | cs | |
| prohibits a p state relati | f the state const person from cons ng to persons w ential structure. | piring to circur ho are to perfo | nvent the lice orm work on a | ensing requ a residentia | l building or a |

This application can also be completed online. Visit detroitmi.gov/bseed/elaps for more information.

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